8. Disability Coverage

Your Disability benefits are designed to provide continuing income if you become ill, injured, or pregnant and are unable to work.

<table>
<thead>
<tr>
<th>For more information on ...</th>
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</tr>
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</tbody>
</table>
Highlights

Your Disability Benefits …

Provide Coverage at No Cost
Coverage under the Short-Term Disability Plan and Long-Term Disability Plan is provided automatically, at no cost to you.

Continue Part of Your Pay for Up to 180 Calendar Days
The Short-Term Disability Plan continues part of your Pay for up to 180 calendar days of disability, based on your length of service and the duration of your disability. NOTE: 6 months or 26 weeks of disability are administered as 180 days.

Replace Part of Your Pay for Disabilities that Continue Past 180 Calendar Days
The Long-Term Disability Plan continues part of your Pay after you have been disabled for 180 calendar days with benefits payable until you reach age 65 or until your disability ends, if earlier. If you become disabled on or after reaching age 60 but before age 69, benefits may continue for 5 years (starting with the date you begin long-term disability), or until you reach age 70, whichever comes first. If you become disabled on or after reaching age 69, benefits may continue for up to 12 months (starting with the date you begin long-term disability).

Are Coordinated with Other Disability Income
Your short-term disability and long-term disability benefits may be reduced by other income benefits, such as Workers’ Compensation and Social Security, you receive while disabled.

What Happens to Your Benefits When …
For more information about what happens to your disability benefits when certain changes or events occur, see “How Changes Affect Your Benefits” in the “About Your Benefits” chapter.
Short-Term Disability Plan

The short-term disability plan is designed to protect your income if you are unable to work due to pregnancy or non-occupational illness or injury. Casual employees are not eligible for short-term disability benefits. Employees who are on a leave of absence without pay, including educational leave, personal leave, military leave, or family medical leave for bonding or to care for a family member with a serious health condition, are not eligible for short-term disability benefits.

Short-Term Disability

A short-term disability absence is:

- an absence of 4 or more consecutive calendar days due to pregnancy or a non-occupational illness or injury. For example, you might have a 5 calendar day absence due to a surgery. Also, a case in which you are absent on a Friday and the following Monday is a short-term disability absence.
- an absence of less than 4 calendar days due to a reason that is related to a previous short-term disability absence of 4 or more days. For example, you might return to work after a 5 calendar day absence for a surgery and later have a 2 calendar day absence that is related to the surgery. Both absences would be considered short-term disability (“Hour of Work” and “Disability” are defined in the Glossary).

A paid leave absence is an absence of less than 4 calendar days due to pregnancy or a non-occupational illness or injury. For example, you might be absent for 2 calendar days due to a cold.

Also, paid leave absences include absences that are less than 4 consecutive calendar days for a chronic condition that has not resulted in a short-term disability absence of 4 or more days. For example, you might periodically be absent for a period of less than 4 days due to diabetes, but you have not been absent for 4 or more days for this condition during the 1 year period before your absence. See “Successive Disabilities” for more information about absences for chronic conditions.

Approved paid leave absences are paid at 100% of Pay, are not part of the short-term disability plan, and are not counted against the maximum short-term disability benefit duration.

Successive Disabilities

Periods of disability are treated as separate occurrences if they are:

- due to unrelated causes and are separated by your return to active work for at least 1 full regularly scheduled workday (normally 8 consecutive hours for a full-time employee)
  
  or

- due to related causes and are separated by a return to active work of at least 520 hours or 3 calendar months, whichever is longer
  
  or

- due to related causes and are separated by a 1 year period from the initial date of disability.
If related short-term disability absences of less than 4 consecutive calendar days continue after a 1 year period from the initial date of absence and you have not exhausted your maximum short-term disability benefits eligibility within the 1 year period:

- The cause of these absences will be considered to be a chronic condition and will fall under the paid leave policy up to the calendar year maximum.
- These absences will not be counted against your maximum benefits eligibility, will be paid at 100% of pay up to the calendar year maximum, and will be considered paid leave absences rather than short-term disability absences as long as you are not absent for 4 or more consecutive calendar days. If you are absent 4 or more calendar days for the same reason as your initial absence, this is considered a short-term disability absence. You must contact the claims administrator to receive short-term disability benefits.
- Family and Medical Leave Act (FMLA) leave is unpaid job protection and can run concurrently with paid leave.
- Employees also may choose to make up time and/or use vacation time to cover this time away from work.

**Benefit Duration and Amount**

If you are unable to work due to pregnancy or non-occupational illness or injury, the Short-Term Disability Plan provides continuing pay for up to 180 calendar days of disability. The short-term disability benefit payments you receive depend on your length of service and the duration of your disability. If you have been employed for 6 months or more, the following three tiers of benefit payments apply:

- **Tier 1:** 100% of Pay for the first 42 calendar days (6 weeks) of disability
- **Tier 2:** 80% of Pay for the next 42 calendar days (6 weeks) of disability
- **Tier 3:** 60% of Pay for the remaining 96 calendar days (14 weeks) of disability.

If you have been employed for less than 6 months, the plan provides continuing pay for 30 calendar days for each month of service you completed as of the first day of your disability, limited by the percentages above. Time you are absent for short-term disability does not count toward additional short-term disability eligibility.

The following examples show how the tiered benefit works (in each example, “day” means calendar day):

**Example 1:** If you have worked 6 months, you will receive 100% of Pay for days one through 42 of the short-term disability absence (6 weeks). Beginning on day 43 of the absence, you will receive 80% of Pay through day 84 of the absence (the second 6 weeks). Beginning on day 85, you will receive 60% of Pay through day 180 of the absence (the remaining 14 weeks) (“Pay” is defined in the Glossary).

**Example 2:** If you have worked 2½ months, you will have completed 2 months of work, for the purposes of determining your short-term disability benefit. You will receive 100% of Pay for days 1 through 42 of the short-term disability absence (6 weeks). Beginning on day 43 of the absence, you will receive 80% of Pay through day 60 of the absence, at which time short-term disability benefits will end based on your amount of Company Service as of your initial date of disability (i.e., 2 months times 30 calendar days).

**Supplementing Tier 2 and Tier 3 Benefit Payments with Vacation Pay**

You may supplement the Tier 2 (80%) and Tier 3 (60%) benefit payments with vacation pay, up to the maximum amount of vacation available to you, to reach 100% of Pay by completing an authorization form after a short-term disability claim is initiated.

- The amount of vacation required to reach 100% of Pay is 6 days for the 42 days of benefit payments at Tier 2 (i.e., 1 day of vacation per week of disability) and 28 days for the 96 days of benefit payments at Tier 3 (i.e., 2 days of vacation per week of disability).
- Current year, banked, and deferred vacation may be used to supplement the benefit payments. If you accrue vacation, you may supplement the benefit payments with vacation pay up to the amount you
have accrued at the time of the payments. Additional supplementation may continue as additional vacation is accrued.

- To have benefit payments supplemented with vacation pay, you must complete a Vacation Supplement Authorization form and return the completed form to the ORNL Disability Administration Office at the address on the form. You will receive the form from the third-party claims administrator for the Company after you file a short-term disability claim. The form is also available on the ORNL Benefits Forms web page.
- Vacation may be used to supplement the benefit payments in 1 hour increments.
- If you do not complete and return the Vacation Supplement Authorization form or do not have vacation available to supplement the benefit payments, you will receive only the amount of the tiered benefit.

Claiming Short-Term Disability Benefits

If you are unable to come to work because of a short-term disability absence, you must contact the claims administrator for the Company in order to receive benefits.

- A Salaried employee, you must call on the fourth calendar day of your absence.
- You also must contact the claims administrator for anticipated absences related to pregnancy or a scheduled surgery or other procedure or treatment.

The claims administrator will give you further instructions, send you an information packet via US mail for your claim for benefits, and answer any questions you may have.

Also, you must furnish periodic medical evidence of your pregnancy, illness, or injury if requested by the Company or claims administrator; you must provide the requested information within the timeframe stated in the request, or your benefits may be suspended or denied. The Company and claims administrator reserve the right to confirm your disability with a physician and/or require a written statement from your attending physician at any time during your absence. Upon return to work, a physician's statement may be required indicating your fitness to resume work duties ("Physician" is defined in the Glossary).

In addition, during your disability, you may be required to undergo periodic evaluations in order for the Company to determine if you are able to return to light duty or a reduced work schedule. You may work a reduced schedule for up to 3 months, subject to the approval of the Company.

The claims administrator has the authority to interpret and administer the plan for the Company. The claims administrator will notify you of the decision regarding approval of your claim or if additional information is needed to make a decision on your claim.

Benefit Payments

Plan benefits will be reduced by income benefits you are eligible to receive from other sources because of your disability, such as Workers’ Compensation or any state or federal disability or occupational disease laws or benefits.

If your absence extends beyond 180 calendar days, benefits may become payable according to the Company's long-term disability plan. Any short-term disability benefit overpayments you receive may be recovered by the Company from amounts owed to you when you go on long-term disability or from benefit payments you receive under the long-term disability plan. Your plan benefits will not be reduced by any private disability coverage that you have purchased.

Exclusions

Short-term disability benefits are not payable for disabilities:

- if you are not under the appropriate care and treatment of a licensed practicing physician
- that result from working for yourself (in an income-producing capacity except for Company-approved arrangements) or an employer other than UT-Battelle

If you take an unpaid leave of absence, you must return to active work for at least 1 full regularly scheduled work day (normally 8 consecutive hours) to resume eligibility for short-term disability benefits.
due to willful misconduct, violation of Company rules, or refusal to use safety appliances
or
due to any intentionally self-inflicted injury

resulting from your attempt to commit or the commission of a crime under state or federal law.

**When Short-Term Disability Benefits End**

Benefits for any absence will end on the first of the following days when:

- you refuse to contact your supervisor and the claims administrator to report your disability or to provide updates about your continuing disability
- you do not provide requested satisfactory evidence of or provide incorrect information about your disability
- you refuse to be examined by a physician, ignore a physician’s appointment, or stop following a physician’s prescribed course of treatment
- you refuse to follow any step related to the administration of the short-term disability plan
- you become self-employed or perform services for a third party without the prior written permission of the Company or claims administrator
- you are no longer considered eligible because of a change in your employment status
- you recover from your disability
- you return to work
- you do not return to work for light duty or a reduced work schedule if you are able
- you have received the maximum number of benefit payments
- your employment with the Company is terminated for any reason
- you are confined in a jail, prison, or other penal facility or correctional facility
- you are no longer an active employee
- you voluntarily decline the benefits
  or
  the plan terminates.

**Appeal Procedures**

You may file claims for plan benefits and appeal adverse claim decisions. For appeal procedures, see “Claims Review & Appeals” in the “Administrative Information” chapter.

**Long-Term Disability Plan**

Your long-term disability benefits are designed to provide continuing income if you become ill or injured and are unable to work. You are eligible to participate in this plan as described in the “About Your Benefits” chapter. You are not eligible to participate in this plan if you are on leave without pay, including educational leave, personal leave, family medical leave, or military leave.

You become entitled to benefits after you have been totally disabled, as defined in the Glossary, for 180 calendar days. Long-term disability benefits pick up where short-term disability benefits leave off, after you have been disabled for 180 calendar days.

**NOTE:** 6 months or 26 weeks of disability are administered as 180 days.

**Benefit Amount**

Your monthly Long-Term Disability Plan benefit equals 60% of your regular monthly Pay as of your last day of short-term disability, up to a maximum monthly benefit of $15,000, reduced by income you are eligible to receive from other sources, as described under “Reduction of Benefits (“Pay” is defined in the Glossary).
Duration of Benefits

Benefits under the Long-Term Disability Plan are payable to you once you have been totally disabled, as defined in the Glossary, for 180 calendar days, subject to approval by the claims administrator for the Company.

Phase One

Under the Long-Term Disability Plan, you are considered totally disabled during your first 24 months of long-term disability if you are unable to perform the duties of your regular job with the Company due to illness or injury, and are under the appropriate care and treatment of a licensed practicing physician ("Appropriate Care and Treatment" is defined in the Glossary).

Should you recover from your illness/injury during the first 24 months of long-term disability leave, you must contact the Company Disability Administration Office to request a return-to-work medical evaluation. The decision on whether you return to work will be based on the results of this medical evaluation and the availability of a position for which you qualify. The Disability Administration Office will verify that a position is available for you. If a position is available, a return-to-work medical evaluation will be completed.

Phase Two

After you have received long-term disability benefits for 24 months, you are considered totally disabled if you remain under the appropriate care and treatment of a licensed practicing physician and you are unable to work at any job for which you might be qualified, based on your education, training, and experience.

You may be eligible for severance pay after receiving long-term disability benefits for 24 months. Severance pay benefits are calculated based on your last day worked. See the "Severance Plan" chapter for details.

While you are receiving long-term disability benefits under either Phase One or Two, you must furnish periodic medical evidence of your illness or injury if requested by the Company, and you may be required to undergo periodic evaluations in order for the Company to determine whether you are able to return to work. Failure to do so can result in your benefits being discontinued.

Normally, if you qualify for benefits under the provisions of the plan as stated above, long-term disability benefits are payable until you recover or until you reach age 65, if earlier (unless one of the events under "When Long-Term Disability Benefits End" occurs).

However, special provisions apply if you are age 60 or older when you become totally disabled. If you become totally disabled:

- at age 60 but before age 69, benefits are payable for up to 5 years (starting with the date you begin long-term disability) or until age 70, whichever comes first
- at or after age 69, benefits are payable for up to 12 months (starting with the date you begin long-term disability).

Determining Your Long-Term Disability Benefit

To calculate the amount you are eligible to receive under the Long-Term Disability Plan, follow these steps:

Step 1: Multiply your monthly Pay by 60% to determine your maximum monthly benefit from the plan, up to $15,000.

Step 2: Subtract other income you are eligible to receive, except for family Social Security, to find your adjusted monthly benefit from the plan. Continue on to Step 3 only if you are eligible to receive family Social Security.

Step 3: Add your adjusted monthly benefit (from Step 2) to all other income you are eligible to receive, including family Social Security. If the resulting total of all income benefits you are eligible to receive is more than 75% of your monthly Pay, your monthly long-term disability benefit will be reduced by the excess of your total income benefits over 75% of your monthly Pay.
Reduction of Benefits

Your long-term disability benefits are reduced by other sources of income that are payable to you because of your disability. Income that will reduce your long-term disability benefits includes but is not limited to:

- Workers’ Compensation benefits or benefits provided under a similar law; state disability benefits; and other statutory benefits for disability, retirement, or unemployment
- benefits provided through Company benefit plans, including the pension and business travel accident insurance plans
- income you receive for working on a reduced-hour basis or for rehabilitative employment
- or
- any Social Security disability benefits for which you are eligible (refer to the Social Security and long-term disability benefits chart that follows).

If you are receiving benefits for Social Security Retirement Income and/or pension, prior to the date of disability, benefits are not reduced.

If any of this income is paid as a lump sum and results in an overpayment of disability benefits to you, you must reimburse the Company for the amount of the overpayment. If you do not repay the Company, your long-term disability benefit will be calculated as if this income were paid monthly. The Company has the right to recover any overpayments you receive, and your monthly benefit payment will be reduced by the maximum amount possible, as determined by the claims administrator, to recover any overpayment you receive.

The claims administrator that pays the long-term disability benefits will instruct you on how to apply for Social Security benefits. If you do not exhaust the steps to obtain Social Security benefits, your long-term disability benefits will be reduced by your estimated Social Security benefits, as calculated by the claims administrator. See the following “Social Security and Long-Term Disability Benefits” chart for more information.

Your long-term disability benefits will not be reduced by any private disability coverage that you have purchased.

### Disability Example

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assume you earn $3,000 a month.</td>
<td></td>
</tr>
<tr>
<td>Monthly Pay................................. $3,000</td>
<td></td>
</tr>
<tr>
<td>× long-term disability benefit percentage........... × 60%</td>
<td></td>
</tr>
<tr>
<td>Maximum monthly long-term disability benefit...........</td>
<td>$1,800</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assume you are eligible for primary Social Security disability benefits of $800 a month.</td>
<td></td>
</tr>
<tr>
<td>Maximum monthly long-term disability benefit...........</td>
<td>$1,800</td>
</tr>
<tr>
<td>− Primary Social Security...........</td>
<td>− $800</td>
</tr>
<tr>
<td>Adjusted monthly long-term disability benefit...........</td>
<td>$1,000</td>
</tr>
</tbody>
</table>
Assume you are eligible for family Social Security disability benefits of $500 a month.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjusted monthly long-term disability benefit</td>
<td>$1,000</td>
</tr>
<tr>
<td>+ Primary Social Security</td>
<td>+ $800</td>
</tr>
<tr>
<td>+ Family Social Security</td>
<td>+ $500</td>
</tr>
<tr>
<td>= Total disability income</td>
<td>$2,300</td>
</tr>
<tr>
<td>– 75% of monthly Pay</td>
<td>– $2,250</td>
</tr>
<tr>
<td>= Benefit reduction</td>
<td>$50</td>
</tr>
</tbody>
</table>

**Final monthly long-term disability benefit** $950
Social Security and Long-Term Disability Benefits

You should apply for Social Security disability benefits within 90 days of the date your long-term disability leave becomes effective.

If you have not received a benefit determination from Social Security after you have been receiving long-term disability benefits for 12 months, or if your original claim is denied and you do not file an appeal within 30 days of your receipt of the denial, then your long-term disability benefits will be reduced by your estimated Social Security benefits, as calculated by the claims administrator.

<table>
<thead>
<tr>
<th>If...</th>
<th>Then...</th>
</tr>
</thead>
<tbody>
<tr>
<td>You later complete the Social Security appeals process and are denied benefits</td>
<td>Your long-term disability benefits will be retroactively reinstated, and you will receive a “catch-up” payment</td>
</tr>
<tr>
<td>You receive a cost of living increase to your Social Security disability income after your long-term disability benefit has been calculated</td>
<td>Your long-term disability benefits will not change</td>
</tr>
<tr>
<td>Your disability makes you eligible to receive family Social Security benefits</td>
<td>Your total disability income from all sources may not exceed 75% of your monthly Pay</td>
</tr>
</tbody>
</table>

Claiming Long-Term Disability Benefits

Long-term disability benefits cannot begin until the claim forms sent to you by the claims administrator have been satisfactorily completed by you and your physician and received by the claims administrator. The claims administrator and the Disability Administration Office will assist you in filing your claim.

You are required to apply for Social Security and any other income you may be eligible to receive as a result of your disability. If your initial application for Social Security is denied, you are required to pursue the entire Social Security benefits appeals process through the Social Security Office.

Exclusions

Long-term disability benefits are not payable for disabilities:

- occurring during the first 12 months that your plan coverage is in effect if caused by any condition for which you received treatment during the 3-month period immediately before your plan coverage became effective
- if you are not under the appropriate care and treatment of a licensed practicing physician
- that result from working for yourself (in an income-producing capacity except for Company-approved arrangements) or an employer other than UT-Battelle
- due to willful misconduct, violation of Company rules, or refusal to use safety appliances
- due to any intentionally self-inflicted injury
- resulting from your attempt to commit or commission of a crime under state or federal law
  
  or

Example of Offset for Rehabilitative Income

Assume you begin receiving rehabilitative income of $1,500 per month.

\[
\text{Monthly rehabilitative income} \times 70\% = \text{Maximum rehabilitative income offset} = \$1,050
\]

Assume your long-term disability benefit is $2,500 per month.

\[
\begin{align*}
\text{Monthly long-term disability benefit} - \text{Monthly rehabilitative income offset} &= \$2,500 - \$1,050 = \$1,450 \\
\text{Adjusted disability benefit} + \text{Rehabilitative income} &= \$1,450 + \$1,500 = \$2,950
\end{align*}
\]

Final monthly income $2,950
• directly or indirectly due to war, declared or undeclared

**Taking a Job While Disabled**

If you return to work at the Company in a full-time position your long-term disability benefits will end.

The claims administrator provides a rehabilitative employment program to assist you in pursuing other employment opportunities if it is determined that you will not be able to return to your job at the Company. If you participate in the rehabilitative employment program, you will be eligible to continue to receive part of your long-term disability income during your participation. Your monthly long-term disability benefits will be reduced by 70% of any income you receive from your rehabilitative employment. Your combined long-term disability benefit and rehabilitative employment income cannot exceed 100% of your regular monthly Pay as of your last day of short-term disability. Your participation in the rehabilitative employment program and the length of time you participate are subject to the discretion and approval by both the Company and the claims administrator.

**When Long-Term Disability Benefits End**

• Long-term disability benefits will end on the first of the following days when:
  • you refuse to provide updates about your continuing disability
  • you do not provide requested satisfactory evidence of or provide incorrect information about your disability
  • you refuse to be examined by a physician, ignore a physician's appointment, or stop following a physician's prescribed course of treatment
  • you refuse to follow any step related to the administration of the long-term disability plan
  • you become self-employed or perform services for a third party without the prior written permission of the claims administrator
  • you recover from your disability
  • you return to work
  • you have received the maximum number of benefit payments
  • you are confined in a jail, prison, or other penal facility or correctional facility
  • you retire
  • you die
  • you voluntarily decline the benefits
  or
  • the plan terminates.

**Successive Disabilities**

If you receive long-term disability benefits, return to work for less than 520 hours or 90 calendar days (whichever is longer) and again become disabled due to the same illness or injury, long-term disability income will resume without a 6 month waiting period. However, if you have been working for at least 520 hours, or more than 90 calendar days (whichever is longer), you will need to satisfy the waiting period before long-term disability benefits begin.

Disabilities due to unrelated causes will be treated as separate disabilities requiring satisfaction of separate waiting periods if the disabilities are separated by your return to work for 8 consecutive hours.

**Appeal Procedures**

You may file claims for plan benefits and appeal adverse claim decisions. For appeal procedures, see “Claims Review & Appeals” in the “Administrative Information” chapter.

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**Administrative Information**

Information about the administration of your Disability Coverage can be found in the chapter titled “Administrative Information.”
Glossary

Appropriate Care and Treatment
During disability, medical care and treatment that is:

- received from a physician whose medical training and clinical experience are suitable for treating your disability;
- necessary to meet your basic health need and is of demonstrable medical value;
- consistent in type, frequency, and duration of treatment with relevant guidelines of national medical, research, and health care coverage organizations and government agencies;
- consistent with the diagnosis of your condition; and
- maximizing your medical improvement.

Approved Rehabilitative Employment Program
During disability, a program of physical, mental, or vocational rehabilitation which:

- is expected to result in your return to your own occupation or to a reasonable occupation on a full-time basis and
- is approved, in writing, by the Company and the insurance company.

A rehabilitative employment program no longer will be considered approved on the earliest of these dates:

- the date you are able to perform the material duties of your own occupation;
- the date you are able to perform work at any other reasonable occupation;
- the date you return to work for the Company on a reduced-hour basis; or
- the date the insurance company or the Company withdraws, in writing, its approval of the program.

Disability
Under UT-Battelle’s Disability plans, you are determined to have a disability if you are unable to perform the duties of your regular job with the Company due to illness or injury and are under the appropriate care and treatment of a licensed practicing physician. The Company’s Claims Administrator makes that determination.

Hour of Work
Each hour of work for the Company for which you are paid, including straight time, overtime, holidays, and jury duty. However, vacations, personal leave, and time off for union business are not included in calculating your hours of work.

Light Duty Assignments
Temporary modified duties assigned as the result of temporary physical limitations due to non-occupational injury or illness or pregnancy that prevent an employee from performing the full scope of duties of his or her regular assigned job.

Long-Term Disability
Your long-term disability benefits are designed to provide continuing income if you become ill or injured and are unable to work. You become eligible for benefits after you have been totally disabled for 6 months.

Pay
For Short-Term Disability and Long-Term Disability
Your monthly basic rate of pay in effect just before your total disability begins and before any pre-tax salary reductions. Pay does not include overtime, bonuses, or any other form of extra compensation.
Physician
A person who is licensed to prescribe and administer drugs or to perform surgery and who operates within the scope of his or her license.

Short-Term Disability
The short-term disability plan is designed to protect your income if you are unable to work due to illness, injury, or pregnancy.

Total Disability or Totally Disabled
For Long-Term Disability
During the first 24 months you are absent from work under the long-term disability plan, you are considered Totally Disabled if you are unable to perform the duties of your regular job with the Company due to illness or injury and are under the regular care of a licensed practicing physician. After you have been absent from work for 24 months, you are considered Totally Disabled if you remain under the regular care of a licensed practicing physician and you are unable to work at any job for which you might be qualified based on your education, training, and experience.